

**Commission For Children with Special Health Care Needs
Provider Type 22
907 KAR 1:705**

Information about the program:

- All Commission for Special Health Care Needs providers must be approved by the Kentucky Commission for Children with Special Health Care Needs.
- The facility administrator or director must sign all forms.
- Out-of-state providers may not enroll in this program.
- Provider can only be an entity - NO INDIVIDUALS
- The Commission is the enrolled entity. They do have sub-contractors.

Additional information to be submitted by the provider for application processing:

- MAP-811 Non-Credentialed
- MAP-811 Addendum E
- W-9
- NPI and Taxonomy Verification (If applicable)

Important addresses:

- KY Medicaid
Provider Enrollment
P.O. Box 2110
Frankfort, KY 40602